

GIRVAN HALF MARATHON

ENTRY FORM

Runner (delete as appropriate)

Sunday 11th July 2010. Entry £12 SAL members, £14 non members.

Name: _____ Male / Female *(delete as appropriate)

Date of Birth: _____ Age on day of Race: _____

Sal Membership No: _____

Address: _____

Tel No: _____

Club: _____

e-mail address: _____

Three or more participants from the same club will automatically be entered for a team prize. Only first 3 will count.

Disclaimer: I declare that I am medically fit to run and that I do so at my own risk and that the organisers will not be liable for any loss, damage action, claim costs or expenses, which may arise as a result of my participation in the above event or from the postponement of this event for any reason whatsoever. I agree to be bound by the laws of SAL.

Signed: _____ Date: _____

Return form and cheque payable to Girvan AAC to Jill Bone, Race Administrator, 43 The Avenue, Girvan, South Ayrshire, KA26 9DS.